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FILED

Feb 11 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 543149 (9)

1. Corporation Name
FOOD & FEEDSTUFFS INTERNATIONAL, INC.Principal Place of Business
2655 LE JEUNE ROAD
SUITE 611
CORAL GABLES FL 33134
USMailing Address
200 S BISCAYNE BLVD
STE 4874
MIAMI FL 33131-5339
US3. Date Incorporated or Qualified
08/10/19773a. Date of Last Report
02/20/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address c/o Peninsula

26 Registered Agents, Inc.

Suite, Apt. #, etc. #4874

27 200 S. Biscayne Blvd.

City & State

28 Miami, FL

Zip

29 33131

Country

30

4. FEI Number
59-1772587Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS, INC.
200 S. BISCAYNE BLVD.
STE 4874
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETENAME MAGILL, LORRAINE
STREET ADDRESS 2655 LE JEUNE ROAD - SUITE 611
CITY-ST-ZIP CORAL GABLES, FL 00000TITLE PD ☐ DELETENAME BUNGE, SIEGFRIED H
STREET ADDRESS 2655 LE JEUNE ROAD - SUITE 611
CITY-ST-ZIP CORAL GABLES FLTITLE STD ☐ DELETENAME BUNGE, MARGARETE
STREET ADDRESS 2655 LE JEUNE ROAD - SUITE 611
CITY-ST-ZIP CORAL GABLES FLTITLE V ☐ DELETENAME HORMAZABAL, FREDDY
STREET ADDRESS 2655 LE JEUNE RD, STE 611
CITY-ST-ZIP CORAL GABLES FLTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LORRAINE MAGILL, V.P. 2/7/97

(305) 448-2132

Date

Daytime Phone #

CR2E034 (9/96)